

Giga Watt Token Settlement
c/o Epiq
P.O. Box XXXX
Portland, OR 97208-3770
U.S & Canada Toll-Free Number: XXXX
International Number: XXXX
Email: info@GigaWattTokenSettlement.com
Website: www.GigaWattTokenSettlement.com

CLAIM FORM

PART I – GENERAL INSTRUCTIONS

1. To be eligible to receive a share of the net fund in the Giga Watt Token settlement, you must either (a) mail a completed and signed claim form to the above address via U.S. mail, postmarked on or before [date], or (b) complete and submit the claim form through the settlement website, www.gigawatttokensettlement.com, on or before [date].
2. Complete this claim form only if you owned Tokens as of November __, 2018. Any Tokens you sold prior to November __, 2018, or acquired after November __, 2018, are not covered by this settlement.
3. Separate claim forms should be submitted for each separate legal entity. Conversely, a single claim form should be submitted on behalf of one legal entity no matter how many separate accounts or transactions that entity has.
4. Agents, executors, administrators, guardians, and trustees must complete and sign the claim form on behalf of persons represented by them.
5. Your claim is not deemed submitted until you receive an acknowledgement email. The settlement administrator will acknowledge receipt of your claim form by email, within __ days. If you do not receive an acknowledgement email within __ days, please call the settlement administrator at the numbers listed on the top of this form.
6. If you have questions concerning the claim form or need additional copies of the Claim Form or the Notice, you may contact the Settlement Administrator, Epiq. The contact information is above.

The settlement administrator will use this information for all communications regarding this claim form. If this information changes, you must notify the settlement administrator in writing at the address above.

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[illegible][illegible]

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[illegible][illegible][illegible][illegible][illegible][illegible]

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[illegible]

100 - 30 = 70

[illegible]☐ Other (please specify) _____

☐ Corporation

IF YOU NEED ADDITIONAL SPACE FOR THE INFORMATION REQUESTED, ATTACH EXTRA PAGES IN THE SAME FORMAT. PRINT THE OWNER'S FULL NAME ON EACH ADDITIONAL PAGE.